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SERIAL NUMBER 09/382,275	FILING OR 371(c) DATE 08/25/1999 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 20220-311
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APPLICANTS
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**** CONTINUING DATA *******
 This application is a CIP of 09/139,804 08/25/1998 ABN *AB*

**** FOREIGN APPLICATIONS *******
None *A*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 09/08/1999**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 5	TOTAL CLAIMS 81	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>AB</i>				

ADDRESS
37374

TITLE
IMPLANTABLE DEVICE FOR PROMOTING REPAIR OF A BODY LUMEN

FILING FEE RECEIVED 2066	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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